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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/693,903	
	Filing Date	10/28/2003	
	First Named Inventor	Koji MURANISHI	
	Group Art Unit	2816	
	Examiner Name	Ryan C. Jager	
Total Number of Pages in This Submission		Attorney Docket Number	031948-3

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Reconsideration
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Donald R. Studebaker, Reg. No. 32,815 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	February 27, 2007

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Docket No. 031948-3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)	
Koji MURANISHI)	Group Art Unit: 2816
Application No. 10/693,903)	Examiner: Ryan C. Jager
Filed: October 28, 2003)	Confirmation No. 3959
For: RELIABLE PHASE ADJUSTMENT)	Date: February 27, 2007
CIRCUIT)	

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REQUEST FOR RECONSIDERATION

Mail Stop **AMENDMENT**
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed November 27, 2006, it is respectfully
requested that the objections and rejections of record be reconsidered and withdrawn by the
Examiner in view of the following detailed comments.